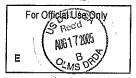
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Total Constitution or construction of the Constitution of the Cons	2. Fiscal Year Covered From:			
	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Marty Crandall	Name Teamsters Local 150			
	Labor Organization File Number 003-293			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 7120 East Parkway	Street 7120 East Parkway			
City Sacramento	City Sacramento			
State Calif ZIP Code + 4 95823	State Calif ZIP Code + 4 95823			
5. Position in labor organization. Business Representative				
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
monotony value from an ampleyor whose ampleyors train superimet				
	on represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
	on represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery	7.a. Nature of Interest, Transaction, or Income. See continuation page			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income.			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income. See continuation page			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 8400 Maryland Ave	7.a. Nature of Interest, Transaction, or Income. See continuation page 7.b. Amount.			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 8400 Maryland Ave City St. Louis	7.a. Nature of Interest, Transaction, or Income. See continuation page 7.b. Amount. \$65.00			
6. Name and address of Employer (including trade name, if any). Name Sara Lee Bakery Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 8400 Maryland Ave City St. Louis State Missouri ZIP Code + 4 63105	7.a. Nature of Interest, Transaction, or Income. See continuation page 7.b. Amount. \$65.00 Security and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the			

Date

Telephone Number

Name of Person Filing Marty Crandall	File Number U-					
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acceptable and the consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organication.	erwise dealing with the business stively seeking to represent, or antirectly to or otherwise					
Name and address of Business (including trade name, if any).	9. Business deals with:					
NameNorthern Calif. Bakery Drivers Security	Flund a. Labor Organization					
Trade Name, if any: (administered by Zenith Admin.)	- Kravenić					
P.O. Box, Bldg., Room No., if any P.O. Box. 7051	xx b. Trust					
Street	c. Employer					
City San Francisco						
State Calif. ZIP Code + 4 94120						
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.					
Name Northern California Bakery Drivers Tru	11. 1.1					
Trade Name, if any: (administered by Zenity Admin.)	Professional administrative services.					
P.O. Box, Bidg., Room No., if any P O Box 7051						
Street						
City San Francisco	11.b. Approximate dollar value of such dealing.					
U.A.II. I.L.A.II.C.L.B.C.V	12.a. Nature of interest held or income received.					
State Calif. ZIP Code + 4 94120	See continuation page.					
	12.b. Amount. 4,559.36					
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.						
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.					
Name						
Trade Name, if any:						
P.O. Box, Bldg., Room No., if any						
Street						
City						
State ZIP Code + 4						
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.					

•				
Name of Person Filing	•	,	File Number U-	;

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name of Employer from Pg. _1:

7.a. Nature of Interest, Transaction or Income (con't from Pg. 1__):

In performance of his duties as a business representative the person identified in item 3 from time to time transacts business over breakfast, lunch or dinner with representatives of the employers for the bargaining units assigned to him by the labor organization listed in item 4. The amount entered in item 7b is the estimated value of the expenditure made by the employer identifed in item 6 on his behalf for such food and beverages on or about April 21, 2004. This estimate is based on a review of a business calendar for appointments and meetings in 2004.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name of Business from Pg. 2:

Northern Calif. Bakery Drivers (administered by Zenith Admin.)

12.a. Nature of interest held or income received (con't from Pg. 2): The person identified in item 3 is a Union Trustee on the Board of Trustees of the entity identified in item 10 which is jointly administered health trust fund under Labor-Mgmt Relations of Act 1947 as amended (the Trust Fund) In performance of his duties as a trustee on the Trust Fund he has met with representatives of the entity identified in item 8 for the purpose of discussing trust-fund related matters. During the course of such meetings said representatives paid for food and beverages and incidental expenses. The amount entered in 12b is the estimated value of such food and beverage related expenditures on or about January 13,14; March 30; April 15,16; July 15,16; October 14; November 30 & December 5; August 24, 2004. This estimate is based on review of a business calendar for appointments and meetings in 2004.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name of Business from Pg. 2:

12.a. Nature of interest held or income received (con't from Pg. 2): The person identified in item 3 is a Union Trustee on the Board of Trustees of the enitive identified in item 8 which is a jointly administered health trust fund under the Labor-Management Relations Act of 1947, as amended (the Trust Fund). The amount entered in item 12b represents (1) reimbursement of transportation, lodging, food and beverage, and incidental expenses incurred by the Union trustee in connection with his attendance of quarterly meetings of the Board of Trustees and periodic Trustee Committees of the Trust Fund or otherwise in connection with the performance of his dutles as a Union Trustee, and/or (2) estimated value of food and beverages provided or made available to him by the Trust Fund at such meetings or food and beverages in connection with such meetings that were paid for by others who received reimbursement from the Trust Fund for such food and beverage expenditures. The quarterly meetings referenced above occurred on or about